

Paul E. Patton  
Governor



Janie A. Miller  
Commissioner

PO Box 517  
Frankfort, KY 40602-0517

## Department of Insurance

(502) 564-3630  
(800) 595-6053 (800) 462-2081 TDD

### CHECK REMITTANCE FORM

Please Check Company Type

**DOMESTIC**

Property and Casualty:\_\_\_\_\_ Life:\_\_\_\_\_ Health:\_\_\_\_\_

**ONE CHECK REMITTANCE FORM MUST BE COMPLETED IN FULL FOR EACH COMPANY**  
**(DO NOT COMPLETE ONE FOR MULTIPLE COMPANIES OR BY GROUPS) IN ORDER TO BE ACCURATELY**  
**CREDITED FOR PAYMENT**

**DUE - MARCH 1, 2003**

COMPANY NAME\_\_\_\_\_

CONTACT PERSON\_\_\_\_\_ TELEPHONE NUMBER\_\_\_\_\_

ADDRESS\_\_\_\_\_

IRS NUMBER\_\_\_\_\_ NAIC NUMBER\_\_\_\_\_ GROUP NUMBER\_\_\_\_\_

CHECK NUMBER\_\_\_\_\_ CHECK DATE\_\_\_\_\_

Annual Statement Filing Fee - \$100.00

Certificate of Authority Renewal - \$100.00

Audited Financial Statement - \$100.00

1<sup>st</sup> Quarter Filing - \$100.00

2<sup>nd</sup> Quarter Filing - \$100.00

3<sup>rd</sup> Quarter Filing - \$100.00

**TOTAL DUE: \$600.00**

Checks must be made payable to the Kentucky State Treasurer and mailed to the attention of Regina Goodrich, Financial Standards and Examination Division, Kentucky Department of Insurance P.O. Box 517, Frankfort, KY 40602-0517 overnight mail may be sent to 215 West Main Street, Frankfort, KY 40601.



An Equal Opportunity Employer M/F/D